

**Appendix Table 1.** Characteristics of Participants at Baseline by Black and White Race<sup>a,b,c</sup>  
(N=32,986)

<b>Characteristics</b>	<b>White participants (n=32,632)</b>	<b>Black participants (n=354)</b>
Demographic factors		
Mean age, years (SD)	67.9 (6.4)	68.6 (5.8)
Marital status, %		
Married	75.2	61.6
Divorced, separated, or single	7.5	17.0
Widow	17.3	21.5
Missing	0.1	0.0
Education, %		
Registered nurse	61.5	27.7
Bachelor's	20.6	27.7
Master's or Doctorate	10.5	25.4
Missing	7.5	19.2
Husbands' highest education, %		
High school graduate or less	32.3	27.7
College graduate	24.2	16.4
Graduate school	22.1	15.3
Missing	21.4	40.7
Census tract median income quartiles, %		
\$41,125	24.9	35.9
\$53,426	25.0	24.3
\$66,869	25.0	23.7
\$91,162	25.1	16.1
Health behaviors		
Smoking status, %		
Never smoker	48.0	52.0
Past smoker	42.6	39.8
Current	9.0	7.6
Missing	0.4	0.6
Alcohol consumption, %		
None	36.5	54.8
1–14 g/d	47.2	35.0
≥15 g/d	14.8	5.9
Missing	1.5	4.2
Physical exam for screening purposes, %	88.5	91.0
Mean total physical activity, MET/week (SD)	23.9 (26.8)	22.5 (26.0)
Mean diet (AHEI)	51.2 (13.0)	54.3 (16.5)
Mean BMI (SD)	26.0 (5.6)	27.3 (6.9)
Health conditions		
Mean CESD-R(SD)	5.1 (3.8)	4.5 (3.5)

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Depression (CESD-R $\geq$ 10 or physician diagnosed or antidepressant use prior to or in 2004), %	24.2	15.5
No physical limitations in 2004, %	47.9	43.5

<sup>a</sup>Unless noted, values are percentages or means and their SD.

<sup>b</sup>Values of categorical variables may not sum to 100% due to rounding or because of missing data.

<sup>c</sup>Optimism was measured using the Life Orientation Test - Revised (LOT-R).

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**Appendix Table 2.** Multinomial ORs for the Association Between Optimism and Healthy Aging (2004 to 2012; N=33,326), Comparing Odds of Healthy Aging (Healthy in All 3 Domains) Versus Several Levels of Usual Aging (Healthy in 2, 1, or 0 Domains)<sup>a</sup>

<b>Models</b>	<b>Odds of healthy aging vs usual aging 2 (Healthy in 2 domains)</b>	<b>Odds of healthy aging vs usual aging 1 (Healthy in 1 domain)</b>	<b>Odds of healthy aging vs usual aging 0 (Healthy in 0 domains)</b>
	<b>OR (95% CI)</b>	<b>OR (95% CI)</b>	<b>OR (95% CI)</b>
Age-adjusted model 1 <sup>b</sup>	<b>1.15 (1.11, 1.20)</b>	<b>1.34 (1.29, 1.40)</b>	<b>1.62 (1.55, 1.70)</b>
Model 2 <sup>c</sup>	<b>1.09 (1.04, 1.13)</b>	<b>1.18 (1.14, 1.23)</b>	<b>1.28 (1.22, 1.34)</b>
Model 3 <sup>d</sup>	<b>1.08 (1.04, 1.13)</b>	<b>1.17 (1.12, 1.22)</b>	<b>1.26 (1.20, 1.33)</b>

*Notes:* Boldface indicates statistical significance ( $p < 0.05$ ).

<sup>a</sup>Domains of health include: chronic diseases, physical function, and subjective cognitive concerns.

<sup>b</sup>Per 1 SD increase in optimism score.

<sup>c</sup>Model 2 adds potential confounding factors to Model 1: physical function at baseline, race, marital status, nurses' education, husbands' education, census tract median income, and current/past depression (doctor-diagnosed depression, anti-depressant medication use, or high depressive symptoms).

<sup>d</sup>Model 3 adds possible intermediates (which could also be confounders) to Model 2: BMI, smoking status, physical activity, alcohol consumption, physical examination for screening purposes, diet (Alternate Healthy Eating Index).

**Appendix Table 3.** Rate Ratios and 95% CIs for the Association Between Optimism and Healthy Aging Restricted to Participants With No Depression Prior to or at Baseline (2004 to 2012; n=25,296)

Models	Optimism					<i>p</i> -trend
	Continuous optimism score <sup>a</sup>	Quartile 1 (n=6,040) (n=1,096 cases)	Quartile 2 (n=5,843) (n=1,177 cases)	Quartile 3 (n=7,439) (n=1,786 cases)	Quartile 4 (n=5,974) (n=1,715 cases)	
Age-adjusted model 1	<b>1.15 (1.12, 1.18)</b>	ref (1.0)	1.08 (1.00, 1.16)	1.23 (1.15, 1.31)	1.44 (1.35, 1.53)	<b>&lt;0.001</b>
Model 2 <sup>b</sup>	<b>1.08 (1.06, 1.11)</b>	ref (1.0)	1.03 (0.97, 1.10)	1.11 (1.04, 1.18)	1.24 (1.16, 1.31)	<b>&lt;0.001</b>
Model 3 <sup>c</sup>	<b>1.07 (1.05, 1.10)</b>	ref (1.0)	1.03 (0.97, 1.10)	1.09 (1.02, 1.16)	1.22 (1.15, 1.30)	<b>&lt;0.001</b>

*Notes:* Boldface indicates statistical significance ( $p < 0.05$ ).

<sup>a</sup>Per 1 SD increase in optimism score.

<sup>b</sup>Model 2 adds potential confounding factors to Model 1: physical function at baseline, age, race, marital status, nurses' education, husbands' education, census tract median income, and current/past depression (doctor-diagnosed depression, anti-depressant medication use, or high depressive symptoms).

<sup>c</sup>Model 3 adds possible intermediates (which could also be confounders) to Model 2: BMI, smoking status, physical activity, alcohol consumption, physical examination for screening purposes, diet (AHEI).

**Appendix Table 4.** Rate Ratios for the Association Between Optimism and Healthy Aging When Restricting to Those Who Had No Physical Limitations at Baseline (2004 to 2012; n=15,972)

Models	Optimism					<i>p</i> -trend
	Continuous Optimism Score <sup>a</sup>	Quartile 1 (n=3,950) (n=1,226 cases)	Quartile 2 (n=3,409) (n=1,155 cases)	Quartile 3 (n=4,669) (n=1,737 cases)	Quartile 4 (n=3,944) (n=1,635 cases)	
Age-adjusted model 1	<b>1.11 (1.08, 1.13)</b>	ref (1.0)	1.09 (1.02, 1.16)	1.18 (1.11, 1.25)	1.32 (1.24, 1.40)	<b>&lt;0.001</b>
Model 2 <sup>b</sup>	<b>1.07 (1.04, 1.09)</b>	ref (1.0)	1.03 (0.97, 1.10)	1.10 (1.04, 1.16)	1.21 (1.15, 1.29)	<b>&lt;0.001</b>
Model 3 <sup>c</sup>	<b>1.06 (1.04, 1.09)</b>	ref (1.0)	1.04 (0.98, 1.11)	1.09 (1.03, 1.15)	1.21 (1.14, 1.28)	<b>&lt;0.001</b>

*Notes:* Boldface indicates statistical significance ( $p < 0.05$ ).

<sup>a</sup>Per 1 SD increase in optimism score.

<sup>b</sup>Model 2 adds potential confounding factors to Model 1: physical function at baseline, age, race, marital status, nurses' education, husbands' education, census tract median income, and current/past depression (doctor-diagnosed depression, anti-depressant medication use, or high depressive symptoms).

<sup>c</sup>Model 3 adds possible intermediates (which could also be confounders) to Model 2: BMI, smoking status, physical activity, alcohol consumption, physical examination for screening purposes, diet (AHEI).